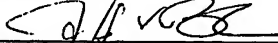


Please type a plus sign (+) inside this box → [+]

PTO/SB/05 (03-01)  
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|   |  |   |                |   |                |
|---|--|---|----------------|---|----------------|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br>(Only for new nonprovisional applications<br>under 37 CFR 1.53(b))   |  | Attorney Docket No.   |                |   |                |
|   |  | First Inventor  |                | Bamber  |                |
|   |  | Assignee  |                |   |                |
|   |  | Title   |                | Sports Glove  |                |
|   |  | Express Mail Label No.  |                | EU815336175US   |                |
| <b>APPLICATION ELEMENTS</b><br>See MPEP Chapter 600 concerning utility patent application contents.   |  |   |                | <b>Mail Stop Patent Application</b><br><b>Commissioner for Patents</b><br><b>P.O. Box 1450</b><br><b>Alexandria, VA 22313-1450</b>  |                |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original, and a duplicate for fee processing)   |  |   |                | 6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)  |                |
| 2. <input checked="" type="checkbox"/> Specification Total Pages [14]<br>(preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive Title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R&amp;D</li><li>- Reference to sequence listing, a table, or a computer<br/>program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>  |  |   |                | 7. Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul></li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>   |                |
| 3. <input checked="" type="checkbox"/> Drawing(s) (35 USC §113) Total Sheets [8]  |  |   |                | <b>ACCOMPANYING APPLICATION PARTS</b><br>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney<br>(when there is an assignee)<br>10. <input type="checkbox"/> English Translation Document (if applicable)<br>11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br>Statement (IDS)/PTO-1449 Citations<br>12. <input type="checkbox"/> Preliminary Amendment<br>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)<br>14. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)<br>15. <input type="checkbox"/> Nonpublication Request under 35 U.S.C.<br>122(b)(2)(B)(i). Applicant must attach form<br>PTO/SB/35 or its equivalent.<br>16. <input checked="" type="checkbox"/> Other: Credit Card Payment Form..... |                |
| 4. Oath or Declaration Total pages [1] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d))<br/>(for continuation/divisional with Box 17 complete)<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTORS</b><br/>Signed statement attached deleting inventor(s)<br/>named in the prior application,<br/>see 37 CFR §§1.63(d)(2) and 1.33(b).</li></ul></li></ul>  |  |   |                |   |                |
| 5. <input type="checkbox"/> Application Data Sheet. See 37 CFR §1.76  |  |   |                |   |                |
| 17. If a <b>CONTINUING APPLICATION</b> , check appropriate box and supply the requisite information below and in a preliminary<br>amendment, or in an Application Data Sheet under 37 CFR §1.76:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____<br>Prior application information: Examiner: _____ Group/Art Unit: _____<br>For <b>CONTINUATION OR DIVISIONAL APPS</b> only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b,<br>is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation<br>can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. |  |   |                |   |                |
| <b>18. CORRESPONDENCE ADDRESS</b>   |  |   |                |   |                |
| <input type="checkbox"/> Customer Number  |  | (Insert Customer No. here)  |                |   |                |
| NAME  |  | Jeffrey V. Bamber   |                |   |                |
| ADDRESS   |  | 5023 Village Drive  |                |   |                |
| CITY  |  | STATE   | OH             | ZIP CODE  | 45244          |
| COUNTRY   |  | TELEPHONE   | (513) 271-7742 | FAX   | (513) 271-2858 |
| Name (Print/Type)   |  | Jeffrey V. Bamber   |                | Registration No. (Attorney/Agent)   | 31,148         |
| Signature   |  |  |                | Date  | 9/26/2003      |

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(Revised 4/7/2003)



09/26/03

16341 U.S. PTO

**FEE TRANSMITTAL  
for FY 2003**

Patent fees are subject to annual revision.

**Compleat if Kn wn**

|                      |                    |
|----------------------|--------------------|
| Application Number   |                    |
| Confirmation Number  |                    |
| Filing Date          | September 26, 2003 |
| First Named Inventor | Jeffrey V. Bamber  |
| Examiner Name        |                    |
| Group/Art Unit       |                    |
| Attorney Docket No.  |                    |

**TOTAL AMOUNT OF PAYMENT (\$)** 375.00**METHOD OF PAYMENT (check one)**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
- Deposit Account Number \_\_\_\_\_
- Deposit Account Name \_\_\_\_\_
- ☐ Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17
2. ☒ PTO-2038 Credit Card Payment Form enclosed.

**FEE CALCULATION****1. BASIC FILING FEE – Small Entity**

| Code (\$)           | Fee Description        | Fee Paid                 |
|---------------------|------------------------|--------------------------|
| 1001 375            | Utility filing fee     | [ \$375.00]              |
| 1002 165            | Design filing fee      | <input type="checkbox"/> |
| 1004 370            | Reissue filing fee     | <input type="checkbox"/> |
| 1005 80             | Provisional filing fee | <input type="checkbox"/> |
| <b>SUBTOTAL (1)</b> |                        | <b>(\$)[375.00]</b>      |

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE – Small Entity**

|              |              | Extra<br>Claims | Fee from<br>Below | Fee<br>Paid |
|--------------|--------------|-----------------|-------------------|-------------|
| Total Claims | [6] - 20** = | [0] x           | [9] =             | [0]         |

Independent Claims [3] - 3\*\* = [0] x [42] = [0]

Multiple Dependent [140] = [0]

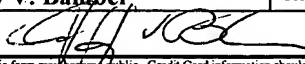
\*\* or number previously paid, if greater; For Reissues, see below

| Code (\$) | Fee Description   |
|-----------|---|
| 1202 9    | Claims in excess of 20                                  |
| 1201 42   | Independent claims in excess of 3                       |
| 1203 140  | Multiple dependent claim, if not paid                   |
| 1204 42   | **Reissue independent claims over original patent       |
| 1205 9    | **Reissue claims in excess of 20 & over original patent |

**SUBTOTAL (2) (\$)[0]****FEE CALCULATION (continued)****3. ADDITIONAL FEES**

| Code (\$)                 | Fee Description   | Fee Paid                 |
|---------------------------|---|--------------------------|
| 1051 130                  | Surcharge-late filing fee or oath   | <input type="checkbox"/> |
| 1052 50                   | Surcharge-late provisional filing fee or cover sheet  | <input type="checkbox"/> |
| 1053 130                  | Non-English specification   | <input type="checkbox"/> |
| 1812 2,520                | For filing a request for <i>ex parte</i> reexamination  | <input type="checkbox"/> |
| 1804 920*                 | Requesting publication of SIR prior to Examiner's action  | <input type="checkbox"/> |
| 1805 1,840*               | Requesting publication of SIR after Examiner's action   | <input type="checkbox"/> |
| 1251 110                  | Extension for reply within 1 <sup>st</sup> month  | <input type="checkbox"/> |
| 1252 400                  | Extension for reply within 2 <sup>nd</sup> month  | <input type="checkbox"/> |
| 1253 920                  | Extension for reply within 3 <sup>rd</sup> month  | <input type="checkbox"/> |
| 1254 1,440                | Extension for reply within 4 <sup>th</sup> month  | <input type="checkbox"/> |
| 1255 1,960                | Extension for reply within 5 <sup>th</sup> month  | <input type="checkbox"/> |
| 1401 320                  | Notice of Appeal  | <input type="checkbox"/> |
| 1402 320                  | Filing a brief in support of an appeal  | <input type="checkbox"/> |
| 1403 280                  | Request for oral hearing  | <input type="checkbox"/> |
| 1451 1,510                | Petition to institute a public use proceeding   | <input type="checkbox"/> |
| 1452 110                  | Petition to revive - unavoidable  | <input type="checkbox"/> |
| 1453 1,280                | Petition to revive - unintentional  | <input type="checkbox"/> |
| 1501 1,280                | Utility issue fee (or reissue)  | <input type="checkbox"/> |
| 1502 460                  | Design issue fee  | <input type="checkbox"/> |
| 1460 130                  | Petitions to the Commissioner   | <input type="checkbox"/> |
| 1807 50                   | Petitions related to provisional applications (37 C.F.R. 1.17(q))   | <input type="checkbox"/> |
| 1806 180                  | Submission of Information Disclosure Statement  | <input type="checkbox"/> |
| 1809 740                  | Filing a submission after final rejection (37 CFR § 1.129(a))   | <input type="checkbox"/> |
| 1810 740                  | For each additional invention to be examined (37 CFR §1.129(b))   | <input type="checkbox"/> |
| 1801 740                  | Request for Continued Examination (RCE)   | <input type="checkbox"/> |
| 1802 900                  | Request for expedited examination of a design application   | <input type="checkbox"/> |
| 1454 1280                 | Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c) | <input type="checkbox"/> |
| Other fee (specify) _____ |   | <input type="checkbox"/> |
| Other fee (specify) _____ |   | <input type="checkbox"/> |

\* Reduced by Basic Filing Fee Paid **SUBTOTAL(3) (\$)[ ]**

| SUBMITTED BY      |   |                  | Complete (if applicable) |                          |
|-------------------|---|------------------|--------------------------|--------------------------|
| Name (Print/Type) | Jeffrey V. Bamber   | Registration No. | 31,148                   | Telephone (513) 271-7742 |
| Signature         |  | Date             | 9/26/03                  |                          |

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